216014607 91667			State of Nebraska Investigator's Motor Vehicle Accident Report  Sheet 1 of 3															
2	Total Nu of Vehi		Local No./ District 107  Agency Case No.  B6-030598						ı	HIT & RUN	INVESTIGATION MADE AT SCENE?  XYES NO			? L 1				
A/1 01 A/2	DATE OF ACCIDENT		1/2016 Lancaste		Y [	S M T	W TH	F S	TIME OI ACCIDE POLICE NOTIFIE	NT	(In Mil 1815 1818	itary Time)	STATE USE	ONLY	,			
В	OF ACCIDENT	CITY	Lincoln								PRIVATE PROPERT	YES NO	04/11	/201	6			
55	ROAD ON WHICH STREET/ C 40th St /Llighway 2							YES NO	LATITUDE									
с 1	DISTANCE FROM FEET N S E W OF MILEPOST							HIGHWAY NO.					LONGITUDE				+	
D	IF AT INTERSECTION IF NOT AT INTERSECTION																	
1	NAME OF INTERSECTING ROADWAY  FEET MILES N S E W OF NEAREST STREET, BRIDGE, RAILROAD CROSSING  S 40th St./Highway 2																	
V1/M <b>01</b> V2/M	MILES			ACCIDENT W W AND MILES	VAS OUTS		S E	<b>W</b> OF	DISTANCI NEAREST Y OR TOWI		ROM NEAF	REST TOWN						
02 E 1	R. WORK R1 R2 R3 R4 S. PEDESTRIAN S1 S2 S3 S4 S5-a S5-b S6-a S6-b DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY?  CODES OF THE DEPT. OF ROADS' PROPERTY?																	
F	DRIVER					VE	HICLE	NO. 1				STATE	l			EEMALI	7	
1 V1/N	DRIVER LICENSE NO. H12784025  DRIVER MARK S BAUGH  DRIVER 6058902210  STATE (Of License) NE SEX MALE								-									
2 V2/N	DRIVER ADDRESS 1201 N 7TH ST., BEATRICE, NE 68310  DATE OF BIRTH OF 06/08/1959									V1/								
2	DWNER PHONE LOCAL NO. VIZ.  MARK S BAUGH  OWNER 6058902210										-							
<sup>G</sup> 4		WHER ADDRESS CITY, STATE, ZIP CITATION YES CITATION NO.  1201 N 7TH ST., BEATRICE, NE 68310 PENDING NO								V1/	/2							
Н	LICENSE DA 2210 YEAR 2016 ST.						STA' (Of Pl		WY	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	73							
5 V1/O	VEHICLE	YEAR MAKE MODEL BODY STYLE COLOR ESTIMATED DAMAGE							V1/	/4								
3	VEHICLE ID NO. (VIN) 1G6DL5ED2B0103542 INSURANCE ALLSTATE INSURANCE								V1/ 18									
3	TOWED TO TOWED BY POLICY NO. 101 CHARLESTON ST. CAPITAL TOWING 985946623								V1/	/6								
1	DRIVER		1142207	000		VE	HICLE	NO. 2				STATE	NE		-v C	FEMALE	4	.5
V1/P	LICENSE NO. H13267606 (Of License) NE SEX X N  DRIVER PHONE LOCAL NO.							MALE	+									
1 V2/P	DRIVER ADDRI	MICHAEL R PETERSEN 4024306635 V2/1																
1	4000 S 56TH ST. #130, LINCOLN, NE 68516    BIRTH   03/27/1992																	
J 01	LISA PETERSEN 4024993608 08-04-1962  OWNER ADDRESS CITY, STATE, ZIP CITATION X YES CITATION NO.								V2/									
V1/Q	5120 S 37TH ST., LINCOLN, NE 68516  LICENSE PA NO. TEG094							YEAR	NG NO 2016	LB51	STA	TE	NE	3:   V2/				
1		YEAR		MAKE		MODEL		BODY STY		,	COLOR	ES	STIMATED D		E			
V2/Q <b>1</b>	VEHICLE ID	INSURANCE COMPANY							V2/									
к 02	TOWED TO									V2/								
02	101 CHARLESTON ST.   CAPITAL TOWING   0545710E2027A   Complete this section for all injured persons   DATE OF BIRTH   Seet   Body   Injury   Complete this section for all injured persons   Capital Seet   Capital Se									5	SEX							
VEH. #							red)	(MM / DD / YYYY)					Seat Position	Eject	Body Region		_	M F
1	MARK S BAUGH 1201 N 7TH ST., BEATRICE, NE 68310  LOCAL NO. MEDICAL FACILITY NAME EMS 8					EMS SE	RVICE NAM	1E	06/08/1959 01 1 10 3 EMS RUN REPORT NO.					3	I	М		
VEH. #	NAME	ME ADDRESS																
	LOCAL NO.		MEDICAL FACILITY	NAME			EMS SF	RVICE NAM	IE				EMS RUI	N REPO	ORT NO			
VEH. #					DRESS													
			Luspie scarre				lens -	-DV40					F-12	1 5 5 -	DET			
	OCAL NO. MEDICAL FACILITY NAME EMS SERVICE NAME EMS RUN REPORT NO.																	

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS												
				THE FOLLOWING		BY DIAGRAM WHAT HAP	PENED AG	ENCY CASE NO.				
(		)					В	6-030598				
	Indica Nortl y Arr	ı										
			·	· ( )								
		•		POI #1 (V1-V2): 36' N of S Edge (Med 37' E of W Edge of S 40tl	ian) of Highway 2 n St.							
				POI #2 (Curb): Even w/ C 43'08 E of W Edge of S 40 POI #3 (Sign): 7'09 S of S Curb of Center 40'07 E of W Edge of S 40	th St. Median on S 40th St. th St.		80'   S. 40th Street					
			·	-ALL MEASUREMENTS ARE API -NOT TO SCALE	PROXIMATE			٠				
					88	Pool	8					
						# # W1	V2 G	88'				
					Nebra	iska Hwy 2	·——	<u></u>				
						P.O.1.#2	P.O. #3					
	٠	-				BASED ON OFFICER'S II	88"					
F	orocee	ded t iicle t	o go as he tho o get pushed ir	aveling WB on Highway 2 a ught it was clear. Michael s nto the south median curb o	tated Vehicle #1 th	en collided into the passe	enger side of his vehicle	. The impact	of the collision	on caused		
ERTY	OBJECT STF		<sup>GED</sup> Γ SIGN (ON	OWNER NAME CITY OF LINCOLN (PUBLIC	C WORKS) 555 S 1	OTH ST., LINCOLN, NE 68	B508 PHONE 40244175	51	\$ 25	OF DAMAGE		
PROPI	OBJECT	DAMA	GED	OWNER NAME	ADDRESS		PHONE		APPROX. COST	OF DAMAGE		
WITNESSES	NAME				ADDRESS			PHC	NE			
WITNE	NAME				ADDRESS			PHC	NE			
VEHICLE MOVEMENT BEFORE COLLISION  VEH NO N S E W ROAD OR HIGHWAY NAME				POINT OF IMPA MOST DAMAG (Enter numbers for	ED AREA	AIRBAG DEPLOYED  VEHICLE 1	RESTRAINT USE VEHICLE 1	TOTAL OCCUPAI	NTS 1 2	VEH 1		
1	<del>-</del>	X	HIGHWAY NAME	<u>:</u>	VEHICLE 2	- 1	- 2	ALCOHOL TESTING		ver Pedes- trian		
2		X	HIGHWAY	2 IMPACT UT	OINT OF 03	1 Deployed - front 2 Deployed - side	1 None used - vehicle occup 2 Lap & shoulder belt used	eant LEVEL TESTED	N X N	XN		
	1 01 06 Turning left 07 Making U-turn 08 Entering		07 Making U-tui 08 Entering	1 ,55, 1 9 .	MOST AMAGED AREA 03	<ul><li>3 Deployed - both front/side</li><li>4 Not deployed</li><li>5 Not applicable/</li></ul>	3 Shoulder belt only used 4 Lap belt only used 5 Child safety seat used 6 Child booster seat used 7 DOT approved helmet use	ALCO	HOL/ Driv			
01 Essentially 09 Leaving straight ahead traffic lane				00 None 02 09 Top & windows 10 Undercarriage 01	7 03   04	No airbag available 6 Unknown VEHICLE 2	8 Costume helmet used 9 Restraint use unknown VEHICLE 2	1 Neither	s suspected			
02 Backing 10 Parked 03 Changing lanes 11 Slowing or stopped in traffic Passing 12 Other 05 Turning right 13 Unknown			es 11 Slowing or stopped in tr 12 Other	11 Total (all areas)	05	- 4	2 Yes - alcohol suspected 3 Yes - drugs suspected 4 Yes - alcohol & drugs suspected 5 Unknown					
OFFICER NO. TROOP/ 1702 TEAM/ BEAT 5						DIn Police Departmer	Photographs YES taken? X NO					
INVESTIGATOR NAME (Print or Type)  Scott Jarecke					Approved by	TURE  / Officer Scott Jareck	DATE OF REPORT	04/11/2	016			

## 216014607

State of Nebraska Investigator's Motor Vehicle Accident Description Continuation Report Sheet 91667 STATE USE ONLY B6-030598 DATE OF ACCIDENT (MM / DD / YYYY) PLACE OF ACCIDENT COUNTY Lancaster 04/11/2016 CITY Lincoln S 40th St./Highway 2 ROAD ON WHICH ACCIDENT OCCURRED STREET/HIGHWAY NO. towed due to damages. Michael was cited/released for Failure to Yield R.O.W. to vehicle. TROOP/ TEAM/ BEAT OFFICER NO. DEPARTMENT Lincoln Police Department 1702 INVESTIGATOR NAME (Print or Type) INVESTIGATOR SIGNATURE DATE OF ACCIDENT Scott Jarecke Approved by Officer Scott Jarecke 04/11/2016